Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on	Giuseppa				
	your government-issued picture identification (for example, your driver's license or passport). Bring your picture	First name		First name		
		Middle name		Middle name		
		Amato				
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1170				

Debtor 1	Giuseppa Amato	Case number (if known)	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	66 True Hickory Drive Rochester, NY 14615	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Monroe				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: ☐ Over the last 180 days before filing this petition, I			
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
	choosing to file under								
		☐ Char							
		☐ Chap							
		☐ Chap							
		_ 0							
8.	How you will pay the fee	ab or	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				y the fee in installnee in Installments (O		on, sign and attach the Application for Individua	ls to Pay		
			•	•	,	n only if you are filing for Chapter 7. By law, a ju	udge may,		
		bu ap	t is not rec plies to yo	uired to, waive your ur family size and yo	fee, and may do so only if you are unable to pay the fee i	our income is less than 150% of the official poven installments). If you choose this option, you motical Form 103B) and file it with your petition.	erty line that		
9. Have you filed for bankruptcy within the									
	last 8 years?	☐ Yes.							
			District			Case number			
			District		When	· · · · · · · · · · · · · · · · · · ·			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.		■ No.	Go to	ine 12.					
	residence?	☐ Yes.	Has y	our landlord obtained	d an eviction judgment agains	st you?			
				No. Go to line 12.					
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as paths bankruptcy petition.						as part of			

Debtor 1 Giuseppa Amato

Deb	otor 1 Giuseppa Amato		Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprietor
	Are you a sole proprietor of any full- or part-time	■ No.	Go to Part 4.
	business?		Name and location of business
	A cala proprietorabin in a	☐ Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above
Chapter 11 of the deadlines. If you indicate that you are a small business debtor,			e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of its, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure i.C. 1116(1)(B).
	For a definition of small	■ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Anv	Hazardous Property or Any Property That Needs Immediate Attention
	Do you own or have any	■ No.	······································
	property that poses or is alleged to pose a threat	☐ Yes.	
	of imminent and identifiable hazard to public health or safety?		What is the hazard?
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?
			Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Giuseppa Amato			Case nu	mber (if known)		
Par	6: Answer These Quest	ons for Rep	orting Purposes				
16.	What kind of debts do you have?			onsumer debts? Consumer debts are sonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an		
			No. Go to line 16b.				
			Yes. Go to line 17.				
			re your debts primarily boney for a business or inve	ebts that you incurred to obtain business or investment.			
			No. Go to line 16c.				
			Yes. Go to line 17.				
			tate the type of debts you on the consumer & busing	owe that are not consumer debts or bus	iness debts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapte	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	— res.		Do you estimate that after any exempt vailable to distribute to unsecured credit	property is excluded and administrative expenses tors?		
	are paid that funds will be available for distribution to unsecured creditors?		l Yes				
18.	How many Creditors do you estimate that you owe?	□ 1-49		1 ,000-5,000	2 5,001-50,000		
		50-99		☐ 5001-10,000 ☐ 40,004,05,000	□ 50,001-100,000		
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$0 - \$50	000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			- \$500,000 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million			
20.	How much do you	□ \$0 - \$50	000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Part	:7: Sign Below						
For	you	I have exam	ined this petition, and I de	clare under penalty of perjury that the in	nformation provided is true and correct.		
				7, I am aware that I may proceed, if elig relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request rel	ief in accordance with the	chapter of title 11, United States Code,	specified in this petition.		
		bankruptcy and 3571.	case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Giusep Giuseppa Signature o	Amato	Signature of Do	ebtor 2		
		Executed or	March 5, 2020 MM / DD / YYYY	Executed on	MM / DD / YYYY		

Debtor 1 Giuseppa Amato	Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ited States Code, and have e	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by			wledge after an inquiry that the information in the		
an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.		nougo and an inquity man incompanion in the		
	/s/ Karl W. Kunze	Date	March 5, 2020		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Karl W. Kunze				
	Printed name				
	Karl W. Kunze, Attorney at Law				
	Firm name				
	16 West Main Street				
	Suite 310				
	Rochester, NY 14614-1601				
	Number, Street, City, State & ZIP Code				
	Contact phone 585-222-2222	Email address	karl@k22law.com		
	Bar number & State				
	Dai number a state				

	in this information						
		ation to identify your	case:				
Deb	tor 1	Giuseppa Amato First Name	Middle Name	Last Name			
	tor 2						
(Spou	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	cruptcy Court for the:	WESTERN DISTRICT C	OF NEW YORK			
(if kno	own)					_	cif this is an ded filing
	,					amen	aca ming
○ ff	ioial Ear	m 1065um					
		m 106Sum Your Assets :	and Liabilities an	nd Certain Statistical Inform	ation		12/15
				are filing together, both are equally resp			
infor	mation. Fill oເ	it all of your schedule	es first; then complete th	e information on this form. If you are filir the box at the top of this page.			
			iew Summary and Check	tille box at the top of this page.			
Part	1: Summai	rize Your Assets					
						Your a	ssets of what you own
						value	or what you own
1.	Schedule A/E 1a. Copy line	3: Property (Official Fo	orm 106A/B) om Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B			\$	2,852.00
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	2,852.00
Dort	2: Summo	rize Your Liabilities					,
Part	Z. Sullilla	ize four Liabilities					
							abilities t you owe
2.	Schedule D: (Creditors Who Have Cl	aims Secured by Property	(Official Form 106D)			•
۷.				the bottom of the last page of Part 1 of Sche	edule D	\$	23,375.68
3.	Schedule E/F	: Creditors Who Have	Unsecured Claims (Officia	l Form 106E/F)			4.074.00
	3a. Copy the	total claims from Part	1 (priority unsecured claim	s) from line 6e of Schedule E/F		\$	4,374.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F		\$	177,128.03
					Γ		
				Your total	liabilities	\$	204,877.71
					L		
Part	3: Summai	rize Your Income and	Expenses				
4.		our Income (Official Fo		I		\$	2,823.29
5.		our Expenses (Official onthly expenses from li				\$	3,070.00
Part			Administrative and Stati				
6.			er Chapters 7, 11, or 13?				
υ.	,		• • •	heck this box and submit this form to the cou	urt with you	r other sch	nedules.
7.	YesWhat kind of	debt do you have?					

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$	

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,374.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,374.00

Ell in this inform				
	mation to identify you			
Debtor 1	Giuseppa Amate	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		WESTERN DISTRICT OF		
United States Ba	ankrupicy Count for the.	WESTERN DISTRICT OF	- NEW YORK	
Case number _				☐ Check if this is an amended filing
Official Fo	orm 106A/B			
Schedul	e A/B: Proj	perty		12/15
think it fits best. E information. If mor Answer every ques	Be as complete and accur re space is needed, attac stion.	rate as possible. If two married h a separate sheet to this form	nce. If an asset fits in more than one category, list d people are filing together, both are equally respond. On the top of any additional pages, write your na	nsible for supplying correct
Part 1: Describe	Each Residence, Buildir	ig, Land, or Other Real Estate	You Own or Have an Interest In	
1. Do you own or	have any legal or equitab	le interest in any residence, b	uilding, land, or similar property?	
No. Go to Pa	rt 2.			
☐ Yes. Where	is the property?			
Do you own, lea			icles, whether they are registered or not? Indeed: Executory Contracts and Unexpired Lease	
3. Cars, vans, tr	ucks, tractors, sport i	utility vehicles, motorcycles	s	
■ No				
☐ Yes				
			al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			tries from Part 2, including any entries for =	÷> \$0.00
Part 3: Describe	Your Personal and Hou	sahald Itams		
		itable interest in any of the	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Ma		e, linens, china, kitchenware		
Yes. Desc	ribe			
	Leased o	couch. Estimated value	\$400	Unknown

	pots, pans, dishes, silverware, glassware, coffee maker, blender, toaster, table with five chairs, desk and chair, lamps, king size bed and dresser, nightstand with lamp and clock radio, bookshelf with books and family photos, second desk and chair, tv stand, washer, dryer, vaccumm, iron and ironing board.	\$1,500.00
	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	music collections; electronic devices
	one television and cell phone	\$400.00
	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles	mp, coin, or baseball card collections;
9. Equipment for sports ar Examples: Sports, photogous musical instru ■ No □ Yes. Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
10. Firearms	s, shotguns, ammunition, and related equipment	
11. Clothes Examples: Everyday clo □ No ■ Yes. Describe	othes, furs, leather coats, designer wear, shoes, accessories	
	misc. clothing and wearing apparel	\$800.00
12. Jewelry Examples: Everyday jev □ No ■ Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	
	costume jewelry and earrings	\$150.00
13. Non-farm animals Examples: Dogs, cats, b No Yes. Describe	pirds, horses	
14. Any other personal and ■ No □ Yes. Give specific info	d household items you did not already list, including any health aids you did no	ot list
	of all of your entries from Part 3, including any entries for pages you have attac number here	shed \$2,850.00
Part 4: Describe Your Finance	cial Assets	

Official Form 106A/B

Debtor 1 Giuseppa Amato

Best Case Bankruptcy

De	ebtor 1	Giuseppa Ama	to			Case number (if known)	
Do	o you ov	vn or have any lega	l or e	quitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		•		ne, in a safe deposit box, and on ha	and when you file your petition	
17.					unts; certificates of deposit; shares in with the same institution, list each.	n credit unions, brokerage hous	ses, and other similar
					Institution name:		
			17.1.	Checking	Citizens Bank		\$1.00
			17.2.	Checking	Key Bank		\$1.00
18.	Exam _i ■ No	•	estme	nt accounts with brok	kerage firms, money market account	ts	
19.		ublicly traded stock		Institution or issuer naterests in incorpor	ame: rated and unincorporated busines	sses, including an interest in	an LLC, partnership, and
	-	enture				3	
	_	Give specific inform		about them ne of entity:		% of ownership:	
20.	Negoti	iable instruments inc	lude p	ersonal checks, cash	iable and non-negotiable instrum- niers' checks, promissory notes, and asfer to someone by signing or delive	d money orders.	
	_	Give specific inform		bout them er name:			
21.		ment or pension ac ples: Interests in IRA			03(b), thrift savings accounts, or other	er pension or profit-sharing plar	ns
	☐ Yes.	List each account se		ely. of account:	Institution name:		
22.	Your s Examp	ty deposits and preshare of all unused doles: Agreements with	eposit	s you have made so t	that you may continue service or usoublic utilities (electric, gas, water), to	e from a company elecommunications companies,	or others
	■ No □ Yes.				Institution name or individual:		
23.	Annuit ■ No	ties (A contract for a	period	lic payment of money	to you, either for life or for a number	er of years)	
	■ No	lssue	r name	e and description.			
24.	26 U.S.	ts in an education I C. §§ 530(b)(1), 529			alified ABLE program, or under a	qualified state tuition progra	m.
	■ No □ Yes	Institu	ıtion n	ame and description.	. Separately file the records of any ir	nterests.11 U.S.C. § 521(c):	
25.		, equitable or future	inter	ests in property (otl	her than anything listed in line 1),	, and rights or powers exercis	sable for your benefit
	■ No □ Yes.	Give specific inform	ation	about them			

Official Form 106A/B

De	ebtor 1 Giuseppa Ama	to		Ca	se number (if known)		
26.			e secrets, and other intellectual proposites, proceeds from royalties and licens				
	■ No	i names, web	sites, proceeds from royalites and licens	sing agreements	•		
	☐ Yes. Give specific inform	nation about t	hem				
	 Licenses, franchises, and Examples: Building permits No Yes. Give specific inform 	s, exclusive li	censes, cooperative association holding	s, liquor license	s, professional licens	es	
	loney or property owed to y					Current value of th	10
IVI	oney or property owed to y	you :				portion you own? Do not deduct secur claims or exemption	red
	Tax refunds owed to you						
	■ Yes. Give specific inform	ation about th	nem, including whether you already filed	the returns and	the tax years		
			possible 2019 tax refunds		Federal and NY State	Unkn	own
	■ No □ Yes. Give specific inform		ny, spousal support, child support, main	condition, divorce	, sociomoni, property	Comonicia	
30.		disability insu	urance payments, disability benefits, sich nade to someone else	k pay, vacation p	oay, workers' compe	nsation, Social Security	
	■ No						
	☐ Yes. Give specific inform						
31.	_		rance; health savings account (HSA); cr	edit, homeowne	r's, or renter's insurar	nce	
	■ No☐ Yes. Name the insurance	e company of	each policy and list its value.				
		Company i		Beneficiary		Surrender or refunvalue:	d
32.	If you are the beneficiary o someone has died.		u from someone who has died i, expect proceeds from a life insurance	policy, or are cu	rrently entitled to rece	eive property because	
	No						
	☐ Yes. Give specific inform	nation					
33.			or not you have filed a lawsuit or madutes, insurance claims, or rights to sue	de a demand fo	r payment		
	☐ Yes. Describe each clair	m					
	. Other contingent and unli	iquidated cla	ims of every nature, including count	erclaims of the	debtor and rights to	set off claims	
	Yes. Describe each clair	m					
		Г	nember class action lawsuit agai	inst Wells Far	go Re: auto		
			oan fees		3- 1.0. auto	Unkn	own

Official Form 106A/B Schedule A/B: Property page 4

Debtor	1	Giuseppa Amato		Case number (if known)	
35. An	y fina	ancial assets you did not already list			
	No				
☐ Y	es. (Give specific information			
		ne dollar value of all of your entries from Part 4, including tr 4. Write that number here			\$2.00
Part 5:	Des	cribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ite in Part 1.	
37. Do y	you o	wn or have any legal or equitable interest in any business-relate	d property?		
■ No	o. Go	to Part 6.			
☐ Ye	es. Go	o to line 38.			
	_				
Part 6:		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
16. Do	you	own or have any legal or equitable interest in any farm-	or commercial fishir	g-related property?	
	-	Go to Part 7.			
	Yes.	Go to line 47.			
Part 7:		Describe All Property You Own or Have an Interest in That You	Did Not List Above		
are r.		December in Fred Chin of Flavo an interest in Flat Fou	Did Not Elot / 150 V		
		have other property of any kind you did not already list?	•		
_	•	les: Season tickets, country club membership			
ЦY	es. C	Give specific information			
54. A	dd th	ne dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
•		·· ···································			Ψ
Part 8:		List the Totals of Each Part of this Form			
55. P :	art 1:	: Total real estate, line 2			\$0.00
		: Total vehicles, line 5	\$0.00		
		: Total personal and household items, line 15	\$2,850.00		
		: Total financial assets, line 36	\$2.00		
		: Total business-related property, line 45	\$0.00		
		: Total farm- and fishing-related property, line 52	\$0.00		
		: Total other property not listed, line 54 +	\$0.00		
62. T e	otal p	personal property. Add lines 56 through 61	\$2,852.00	Copy personal property to	stal \$2,852.00
63. T	otal o	of all property on Schedule A/B. Add line 55 + line 62			\$2,852.00

Fil	I in this inforn	nation to identify your case	e:			
	btor 1	Giuseppa Amato				
_		First Name	Middle Name	L	ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	_ast Name	
Un	ited States Ba	nkruptcy Court for the: WI	ESTERN DISTRICT OF N	EW Y	ORK	
	nse number					☐ Check if this is an
						amended filing
O ₁	fficial Fo	<u>rm 106C</u>				
S	chedul	e C: The Prop	erty You Cla	im	as Exempt	4/19
he cas For spe any iun	property you li ded, fill out an e number (if kr each item of ecific dollar an r applicable st ds—may be u emption to a p	sted on Schedule A/B: Proped attach to this page as many nown). property you claim as exent as exempt. Alternative atutory limit. Some exempt nlimited in dollar amount. I articular dollar amount and	erty (Official Form 106A/B) y copies of Part 2: Addition npt, you must specify the yely, you may claim the fitions—such as those for However, if you claim an	as younal Pare amount of the a	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. If it market value of the property be the aids, rights to receive certain be notion of 100% of fair market value.	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement
		statutory amount. y the Property You Claim a	s Exempt			
1.	Which set of	exemptions are you claimi	ing? Check one only, eve	n if yo	our spouse is filing with you.	
	_	aiming state and federal nonl	,	•	, , ,	
	You are cla	aiming federal exemptions.	11 U.S.C. § 522(b)(2)			
2.	For any prop	perty you list on Schedule A	A/B that you claim as exe	empt,	fill in the information below.	
		on of the property and line on	Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		dishes, silverware,	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	toaster, tab and chair, I dresser, nic clock radio and family chair, tv sta	coffee maker, blender, ble with five chairs, desk amps, king size bed and ghtstand with lamp and bookshelf with books photos, second desk and a medule A/B: 6.2	i		100% of fair market value, up to any applicable statutory limit	
		ion and cell phone	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
	Line nom our	icade A.B. 111			100% of fair market value, up to any applicable statutory limit	
		ing and wearing appare	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)
	Line from SCI	nedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
		welry and earrings nedule A/B: 12.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(4)

□ 100% of fair market value, up to any applicable statutory limit

De	btor 1	Giuseppa Amato			Case number (if known)	
		description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		cking: Citizens Bank from Schedule A/B: 17.1	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
	LIIIC	TOTA SCHEdule AV.D. 17.1			100% of fair market value, up to any applicable statutory limit	
		ecking: Key Bank from Schedule A/B: 17.2	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
	Line	IIIIII Scriedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
		eral and NY State: possible 2019	Unknown		\$1.00	11 U.S.C. § 522(d)(5)
		from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
		mber class action lawsuit against Is Fargo Re: auto loan fees	Unknown		\$0.00	11 U.S.C. § 522(d)(5)
		from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
3.	(Sub	you claiming a homestead exemption of ject to adjustment on 4/01/22 and every 3			ed on or after the date of adjustmen	t.)
	=		all beauth a second of the second	on to a	OAE days before you fled this area	
		Yes. Did you acquire the property covered	ea by the exemption w	itnin 1	215 days before you filed this case:	,
		□ No □ You				
		☐ Yes				

Fill in this information to id	entify your ca	ise:				
Debtor 1 Giusep	pa Amato					
First Name		Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Co	urt for the:	WESTERN DISTRICT	OF NEW YORK			
Case number						
(if known)						t if this is an ded filing
					anten	ueu iiiiig
Official Form 106D						
Schedule D: Cre	ditors W	/ho Have Cla	ims Secured	by Propert	y	12/15
Be as complete and accurate as needed, copy the Additional F						
number (if known).	3.,			,	, , , , , , , , , , , , , , , , , , , ,	
. Do any creditors have claims	secured by you	ır property?				
☐ No. Check this box an	d submit this f	orm to the court with you	ur other schedules. You	u have nothing else t	o report on this form.	
Yes. Fill in all of the in	formation belo	W.				
Part 1: List All Secured (Claims					
2. List all secured claims. If a c	reditor has more	than one secured claim. Iis	st the creditor separately	Column A	Column B	Column C
for each claim. If more than one much as possible, list the claims	creditor has a pa	articular claim, list the other	creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Progressive Leasin	g De	scribe the property that s	secures the claim:	\$1,258.00	Unknown	Unknown
Creditor's Name	CC	ouch lease				
	Δς	of the date you file, the o	claim is: Check all that			
256 Data Drive	арг	oly.	Tall to the state and that			
Draper, UT 84020		Contingent				
Number, Street, City, State & Z		Unliquidated				
Who owes the debt? Check or		Disputed ture of lien. Check all that	it apply.			
■ Debtor 1 only	_	An agreement you made (such as mortgage or secu	ıred		
Debtor 2 only		car loan)		·· 		
Debtor 1 and Debtor 2 only		Statutory lien (such as tax	lien, mechanic's lien)			
☐ At least one of the debtors an		Judgment lien from a laws				
☐ Check if this claim relates to community debt		Other (including a right to				
-						

Date debt was incurred

Last 4 digits of account number

0424

Debtor 1 Giuseppa Amato		Case number (if known)		
First Name Middle N	ame Last Name	_		
Santander Consumer USA	Describe the property that secures the claim:	\$22,117.68	Unknown	Unknown
Creditor's Name	car loan Mistubishi G4 repossessed.			
Attn: Bankruptcy P.O. Box 560284 Dallas, TX 75356-0284 Number, Street, City, State & Zip Code Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)	sourca		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2018	Last 4 digits of account number 4276			
			-	
-	column A on this page. Write that number here:	\$23,375.68		
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$23,375.68		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you o	ee notified about your bankruptcy for a debt that yo owe to someone else, list the creditor in Part 1, and t you listed in Part 1, list the additional creditors he nis page.	then list the collection agency	here. Similarly, if yo	u have more
Name, Number, Street, City, State & Santander	Zip Code On wh	ich line in Part 1 did you enter the	e creditor? 2.2	
P.O. Box 961211	Last 4	digits of account number		
Fort Worth, TX 76161		_		

=::: 4											
Fill in ti	his information	n to identify your c	ase:								
Debtor		iuseppa Amato									
Dobtor '		st Name	Middl	le Name	Last Nam	е					
Debtor 2 (Spouse if		st Name	Middl	le Name	Last Nam	е					
United 9	States Bankrun	tcy Court for the:	WESTER	RN DISTRICT OF NE	W YORK						
Offica	Otates Bankrup	tey Court for the.	WEOTER	NA DIOTRIOT OF INC	-W TORK						
Case nu								_			
(if known)										if this is ar led filing	n
									amenu	eu iiiiig	
Officia	al Form 10	6E/F									
Sche	dule E/F:	Creditors W	ho Hav	e Unsecured	l Claim	S				12/1	5
any exect Schedule Schedule left. Attac name and	eutory contracts e G: Executory C e D: Creditors W ch the Continuat d case number (i	or unexpired leases to contracts and Unexpire to Have Claims Secu- tion Page to this page if known).	that could r red Leases ired by Pro e. If you hav	creditors with PRIORI result in a claim. Also (Official Form 106G). perty. If more space is we no information to re	list executo Do not inclus needed, co	ory contractude any cre opy the Par	ts on Schedule A/B: F editors with partially s t you need, fill it out, I	roperty (Off ecured clain number the	ficial Fori ms that a entries ir	m 106A/B) are listed in n the boxes	and on n s on the
Part 1:		our PRIORITY Uns									
_	any creditors hav	ve priority unsecured	i ciaims aga	amst you?							
2 List		ity unsecured claims	If a cradita	r has more than one pr	iority uncocu	rod claim li	st the creditor separate	ly for each o	laim For	oach claim	listed
ident poss	itify what type of c sible, list the claim	laim it is. If a claim has is in alphabetical orde	s both priorit r according	or has more than one pri ty and nonpriority amou to the creditor's name. I n, list the other creditors	nts, list that of If you have n	claim here a	and show both priority a	nd nonpriori	ty amount	ts. As much	n as
(For	an explanation o	f each type of claim, se	ee the instru	actions for this form in th	ne instruction	booklet.)					
							Total claim	Priority amount		Nonpriori amount	ity
2.1	City Chambe	erlain's Office		Last 4 digits of acco	unt number	0209	Unknown		\$0.00		\$0.00
	Priority Creditor's			W/		2046					
	141 South F Fulton, NY 1			When was the debt i	ncurrea?	2016		-			
		City State Zip Code		As of the date you fil	le, the claim	is: Check	all that apply				
Wh	ho incurred the o	lebt? Check one.		☐ Contingent							
	Debtor 1 only			☐ Unliquidated							
	Debtor 2 only			☐ Disputed							
	Debtor 1 and De	btor 2 only		Type of PRIORITY un	nsecured cla	aim:					
	At least one of th	ne debtors and another	r	☐ Domestic support	obligations						
	Check if this cla	aim is for a commun	itv debt	■ Taxes and certain	other debts	vou owe the	e government				
	the claim subjec		,	☐ Claims for death o		,	0				
	No			Other. Specify							
	Yes				ossible t	ax bill					
							.	•			
	Priority Creditor's	enue Service		Last 4 digits of acco	unt number	?	\$3,922.00	\$3,	922.00		\$0.00
	P.O. Box 734			When was the debt i	ncurred?	2018					
		, PA 19101-7346	<u> </u>					-			
		ity State Zip Code lebt? Check one.		As of the date you fil	le, the claim	Is: Check	all that apply				
_		iebt? Check one.		☐ Contingent							
	Debtor 1 only			Unliquidated							
_	Debtor 2 only			Disputed							
	Debtor 1 and De	btor 2 only		Type of PRIORITY un		aim:					
	At least one of the	ne debtors and another	r	☐ Domestic support	obligations						
	Check if this cla	aim is for a commun	ity debt	■ Taxes and certain			-				
	the claim subjec	t to offset?		Claims for death o	r personal in	jury while y	ou were intoxicated				
	No			Other. Specify						-	
	Yes			ir	ncome ta	xes due					

2.3 Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	Ur	nknown	\$0.00	\$0.00
P.O. Box 7346	When was the debt incurred?	various			
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim	is: Chock all that apply	,		
Who incurred the debt? Check one.	Contingent	із. Спеск ан тат арріу			
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im·			
,	☐ Domestic support obligations				
☐ At least one of the debtors and another	_				
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts y□ Claims for death or personal inj	· ·			
No	Other. Specify	ary writte you were into.	xicateu		
□ Yes	possible in	come tax claims	2017 and be	efore	
	pooruin ii				
New York State Dept. of Taxation	Last 4 digits of account number	?	\$452.00	\$452.00	\$0.00
Priority Creditor's Name Bankruptcy Section	When was the debt incurred?	2018			
P.O. Box 5300	mon was the assembanea.	2010			
Albany, NY 12205-0300	A control of the state of the state of the state of				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	,		
_	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ım:			
At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	-			
Is the claim subject to offset?	Claims for death or personal inj	ury while you were into	xicated		
■ No □ Yes	Other. Specify	due			
New York State Dept. of Taxation	Last 4 digits of account number	Ur	nknown	\$0.00	\$0.00
Priority Creditor's Name Bankruptcy Section	When was the debt incurred?	various			
P.O. Box 5300					
Albany, NY 12205-0300 Number Street City State Zip Code	As of the date you file, the claim	ia. Chaok all that apply	,		
Who incurred the debt? Check one.	Contingent	і з. Спеск ан тат арріу			
■ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only					
	☐ Disputed Type of PRIORITY unsecured cla	im:			
☐ Debtor 1 and Debtor 2 only	Domestic support obligations				
At least one of the debtors and another	• • • • • • • • • • • • • • • • • • • •				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts y□ Claims for death or personal inj	-			
Is the claim subject to offset? ■ No	· · · · ·	ury while you were into	xicated		
■ No □ Yes	Other. Specify	come tax claims	2017 and be	efore	
	·				
Part 2: List All of Your NONPRIORITY Unsecual. Do any creditors have nonpriority unsecured claim					
Do any ordanoro nave nonpriority unsecured cialli	io against you:				
☐ No. You have nothing to report in this part. Submit	Alice forms to the control of the				

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

			Total claim
4.1	9519 Brewerton, LLC	Last 4 digits of account number ?	\$2,755.00
	Nonpriority Creditor's Name 9519 Brewerton Rd., Suite 118	When was the debt incurred? 2016	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify back rent claim	_
4.2	Acima Credit	Last 4 digits of account number ?	Unknown
	Nonpriority Creditor's Name 9815 S. Monroe St. Sandy, UT 84070	When was the debt incurred? 2015	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify possible leasing bill	_
4.3	AmeriPride Uniform Services	Last 4 digits of account number 2051	\$39.85
	Nonpriority Creditor's Name		
	3909 New Court Ave Syracuse, NY 13206-1669	When was the debt incurred? 2017	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify service fee	_

Giuseppa Amato	Case number (if known)	
Amica Mutual Insurance Co.	Last 4 digits of account number ?	\$2,054.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 100 Amica Way Lincoln, RI 02865-1167	When was the debt incurred? ?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify car insurance bill	-
Atg Credit, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$1,132.00
P.O. Box 14895	When was the debt incurred? 2016	
Chicago, IL 60614-0895 Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
/ho incurred the debt? Check one.	As of the date you me, the dam is. Oneon all that apply	
Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify consumer debt in collections	-
Atlas Music	Last 4 digits of account number 4051	\$2,077.00
Nonpriority Creditor's Name 1764 Empire Blvd Webster, NY 14580	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify instrument renal charges	

1 Giuseppa Amato	Case nu	mber (if known)	
Capaco, Inc.	Last 4 digits of account number ?		Unknown
Nonpriority Creditor's Name 4000 New Court Ave. Syracuse, NY 13206	When was the debt incurred? 2016		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agr report as priority claims	eement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plans, a	and other similar debts	
Yes	■ Other. Specify paper supplies		
Capital One Bank NA	Last 4 digits of account number 0241		\$2,513.00
Nonpriority Creditor's Name P.O. Box 98873 Las Vegas, NV 89193-8873	When was the debt incurred? 2008-	2013	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agr report as priority claims	eement or divorce that you did not	
■ No	Debts to pension or profit-sharing plans, a	and other similar debts	
Yes	Other. Specify credit card		
Casa Imports	Last 4 digits of account number 7069		\$29.94
Nonpriority Creditor's Name Division of RLE Corp P.O. Box 982008	When was the debt incurred? 2014		
Boston, MA 02298 Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Offect	αιι ιτιαι αμμιγ	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agr report as priority claims	eement or divorce that you did not	
■ No	Debts to pension or profit-sharing plans, a	and other similar debts	
☐ Yes	■ Other. Specify food supplies		

Chautauqua Patrons Insurance Co.	Last 4 digits of account number	6005	Unknowi
Nonpriority Creditor's Name 529 West 3rd Street	When was the debt incurred?	2016	
Jamestown, NY 14701 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify possible in:	surance premium bill	
Chex Systems Inc	Last 4 digits of account number	?	\$0.00
Nonpriority Creditor's Name 7805 Hudson Road, Suite 100 Saint Paul, MN 55125	When was the debt incurred?	?	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify possible ch	ex system report	
Chili Hut Realty	Last 4 digits of account number	?	Unknown
Nonpriority Creditor's Name	When was the debt incurred?	2014	
Utica, NY 13502	When was the dept incurred:	2014	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	L.D.C.	
At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	ı cıaım:	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
s the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	

ebto	r 1 Giuseppa Amato		Case number (if known)	
1	City of Fulton	Last 4 digits of account number	0000	\$247.00
	Nonpriority Creditor's Name Watewr & Sanitation 141 South First St Fulton, NY 13069	When was the debt incurred?	2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify water bill		
1	Coca Cola Refreshments USA, INc Nonpriority Creditor's Name	Last 4 digits of account number	5159	\$331.00
	Attn: Bankruptcy P.O. Box 4108	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify food suppli	ies	
1	Compassionate Family Medicine Nonpriority Creditor's Name	Last 4 digits of account number	1864	\$265.00
	6221 State Route 31, Suite 104 Cicero, NY 13039-8724	When was the debt incurred?	2017	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	u viaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify medical bil	Is	
		Culor. Opcomy		

1 Giuseppa Amato		Case number (if known)	
Cortrust Bank	Last 4 digits of account number	1083	\$0.00
Nonpriority Creditor's Name P.O. Box7030	When was the debt incurred?	2008	·
Mitchell, SD 57301 Number Street City State Zip Code	As of the date you file, the claim	is: Chook all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	tration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify credit card	believed paid	
Credit Acceptance, Corp.	Last 4 digits of account number	3625	\$8,670.00
Nonpriority Creditor's Name 25505 West Twelve Mile Rd.	When was the debt incurred?	03/19	
Southfield, MI 48034-8339 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify car loan. R	еро	
East Area Vol. Emergency Services,	Last 4 digits of account number	?	\$1,053.47
Nonpriority Creditor's Name P.O. Box 34 East Syracuse, NY 13057	When was the debt incurred?	2013	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify medical bil	<u> </u>	

Debto	or 1 Giuseppa Amato		Case number (if known)	
1.1	Erie Insurance	land delimite of annual accordance	8STG	\$185.00
9	Nonpriority Creditor's Name c/o Brennan & Clark Ltd. 721 E. Madison, Ste. 200	Last 4 digits of account number When was the debt incurred?	2016	\$103.00
	Villa Park, IL 60181 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	′	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	u Claiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify insurance I		
1.2			4047	4450.00
)	Family Care Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	1617	\$150.00
	Attn: Patient Billing 1001 West Fayette St #400	When was the debt incurred?	2016	
	Syracuse, NY 13204			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Continuent		
	′	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans	a Gainn	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical bil	ls	
1.2	Feher Rubbish Removal, INc.	Land Parks of the state of the	8935	\$1,632.00
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,032.00
	P.O. Box 11009 Syracuse, NY 13218	When was the debt incurred?	2016-2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debte	
	■ No	Debts to pension or profit-sharin	ig pians, and other similar debts	
	☐ Yes	Other. Specify refuse bill		

Debt	or 1 Giuseppa Amato	Case number (if known)	
1.2	Ferraro Foods Nonpriority Creditor's Name 287 S. Randolphville Road Piscataway, NJ 08854 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply	Unknown
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims 	not
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify food supply bills	_
1.2	First Data Global Leasing c/o	Last 4 digits of account number 7931	\$1,737.00
	Nonpriority Creditor's Name Hunter Warfield 4620 Woodland Corporate Blvd.	When was the debt incurred?	
	Tampa, FL 33614 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did r report as priority claims	not
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify consumer debt	
1.2 1	Gerharz Equipment, Inc. Nonpriority Creditor's Name	Last 4 digits of account number?	\$14,000.00
	220 Teall Ave	When was the debt incurred? 2014-2015	
	Syracuse, NY 13210		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did r	not
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify equipment supplies	

Debt	or 1 Giuseppa Amato	Case number (if known)	
4.2 5	Jefferson Capital Systems	Last 4 digits of account number 2299	\$0.00
	Nonpriority Creditor's Name 16 McLeland Rd.	When was the debt incurred? 2017	
	Saint Cloud, MN 56303-2198 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify	
I.2	Key Bank	Last 4 digits of account number 0182	\$59.00
	Nonpriority Creditor's Name Attn: Bankruptcy (OH-01-51-4002) 4910 Tiedeman Road Cleveland, OH 44144	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify bank fees	
.2	Macys Nonpriority Creditor's Name	Last 4 digits of account number 7949	\$0.00
	Bankruptcy Processing P.O. Box 8053	When was the debt incurred? 2009	
	Mason, OH 45040 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	No		
	☐ Yes	Other, Specify store charge card believed paid	

Giuseppa Amato		Case number (if known)	
Manahani Ozak Ozak		2052	644 400 0
Merchant Cash Group Nonpriority Creditor's Name	Last 4 digits of account number		\$11,169.0
c/o Global Solutions Biz, LLC	When was the debt incurred?	?	
400 Galleria Parkway Suite 1500			
Atlanta, GA 30339		01	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	S: Cneck all that apply	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	■ Other. Specify consumer d		
MVP Healthcare C/O	Last 4 digits of account number	0681	\$1,218.0
Nonpriority Creditor's Name GB Collections, INc.	When was the debt incurred?	2014	
145 Bradford Dr			
West Berlin, NJ 08091-9269	_		
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	a plane, and other similar debts	
	•	- •	
Yes	Other. Specify consumer o	lebt believed to be medical bills	
National Grid / Niagara Mohawk	Last 4 digits of account number	0042	\$5,270.0
Nonpriority Creditor's Name	_		-
Attn: Bankruptcy	When was the debt incurred?	2010-2015	
300 Erie Blvd., West Syracuse, NY 13202			
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify various utili	ity hills	

1 Giuseppa Amato		Case number (if known)	
North Medical	Last 4 digits of account number	?	\$245.00
Nonpriority Creditor's Name Attn: Patient Billing 5100 W. Taft Rd., Ste. 2L	When was the debt incurred?	2016	
Liverpool, NY 13088 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify medical bill	s	
Oswego County DSS	Last 4 digits of account number	9767	Unknown
Nonpriority Creditor's Name			
P.O. Box 1320 100 Spring Street Mexico, NY 13114	When was the debt incurred?	?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify possible DS	SS claim	
Oswego County DSS	Last 4 digits of account number	7074	\$1,008.00
Nonpriority Creditor's Name P.O. Box 1320 Mexico, NY 13114	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	-	
Yes	Other. Specify overpayme	nt of SNAP benefits	

Debto	or 1 Giuseppa Amato	Case number (if known)		
1.3 1	Palmer Fish Co., Inc., DBA	Last 4 digits of account number	\$5,981.00	
·	Nonpriority Creditor's Name Palmer Food Services 900 Jefferson Road, Ste. 1000 Rochester, NY 14627	When was the debt incurred? 2017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify food services billing		
4.3	Paul F. Daniels	Last 4 digits of account number	\$51,123.00	
	Nonpriority Creditor's Name Pauls Provisions, LLC 1150 McQuade Ave.	When was the debt incurred? 2015		
	Utica, NY 13501 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	ne or and alle year may me or announce and appropriate and app		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify food supplies		
1.3	Paychex	Last 4 digits of account number	Unknown	
<u> </u>	Nonpriority Creditor's Name 911 Panorama Trail South	When was the debt incurred?		
	Rochester, NY 14625	=		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	·		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify possible bill		

1 Giuseppa Amato	Case number (if known)	
Pediatric Service Group	Local Auditation of account assembles	\$40.0
Nonpriority Creditor's Name	Last 4 digits of account number	φ40.0
725 Irving Ave., Suite 504 Syracuse, NY 13210	When was the debt incurred? 2015	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 1 only	☐ Contingent ☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bills	
Permanent General Assurance		
Corp.	Last 4 digits of account number 2255	\$1,905.
Nonpriority Creditor's Name P.O. Box 305054	When was the debt incurred? 2016	
Nashville, TN 37230-5054	2010	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify insurance bill	
Progressive Corp.	Last 4 digits of account number 5421	\$1,628.
Nonpriority Creditor's Name ATTN: Bankruptcy	When was the debt incurred? 2016	
6300 Wilson Mills Road		
Cleveland, OH 44143		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify insurance bill	

Giuseppa Amato		Case number (if known)	
Progressive Leasing, LLC		0424	\$1,860.00
Nonpriority Creditor's Name	Last 4 digits of account number		φ1,000.0
Attn: Bankruptcy Dept. 256 Data Drive	When was the debt incurred?	2016	
Draper, UT 84020-2315	_		
Number Street City State Zip Code	As of the date you file, the claim		
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify furniture re	ental bill	
Prospect Hill Radiology Group PC	Last 4 digits of account number	2851	\$42.00
Nonpriority Creditor's Name	- Last 4 digits of account number		* 1=10
Attn: Patient Billing	When was the debt incurred?	2016	
301 Prospect Ave			
Syracuse, NY 13203 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify medical bil	ls	
n e de la companya de			A4 057 0
Raponi Plumbing & Heating Nonpriority Creditor's Name	Last 4 digits of account number		\$1,257.00
507 W. Broadway Fulton, NY 13069	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	· · · · · · · · · · · · · · · · · · ·	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify contractor	billing	

Debte	or 1 Giuseppa Amato		Case number (if known)	
1.4	Rent A Center	Last 4 digits of account number	1131	\$290.00
·	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 5501 Headquarters Drive Plano, TX 75024	When was the debt incurred?	2016	•
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify furniture re	ental bill	
1.4	Renzi Foodservice	Last 4 digits of account number	0575	\$2,887.00
	Nonpriority Creditor's Name P.O. Box 23 Watertown, NY 13601-0023	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	- :	
	Yes	Other. Specify food service	e supplies	
1.4 5	RG&E	Last 4 digits of account number	6339	\$9,265.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 89 East Avenue	When was the debt incurred?	2014-2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	og plans, and other similar debts	
	■ No	Other. Specify utility bill	.g F, and and. and.	
	□ 162	Other. Specify		

1 Giuseppa Amato		Case number (if known)	
SECNY Federal Credit Union	Last 4 digits of account number	1467	\$21,724.9
Nonpriority Creditor's Name c/o Riehlman, Shafer & Shaw 7693 State Route 281 P.O. Box 544	When was the debt incurred?	2015	
Tully, NY 13159 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify consumer of	debt	
Sprint	Last 4 digits of account number	0081	\$8,379.6
Nonpriority Creditor's Name 10002 Park Meadows Dr.	When was the debt incurred?	2014-2016	
Lone Tree, CO 80124 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify cell phone	bill	
St. Joseph's Medical PC	Last 4 digits of account number	7441	\$513.0
Nonpriority Creditor's Name P.O. Box 844210	When was the debt incurred?	2016	
Boston, MA 02284-4210 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,	Chook an mar apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify medical bil	1	

Debto	Giuseppa Amato		Case number (if known)	
4.4	State Farm	Last 4 digits of account number	1358	\$11.45
9	Nonpriority Creditor's Name Attn: Bankruptcy 100 State Farm Place	When was the debt incurred?	2017	*****
	Rallston Spa, NY 12020-8000 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify insurance I	bill	
4.5	Synchrony Bank	Last 4 digits of account number	2477	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 965061	When was the debt incurred?	2011	
	Orlando, FL 32896-5061 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	01 ,	
	Yes	Other. Specify credit card	believed paid	
4.5 1	T Mobile Nonpriority Creditor's Name	Last 4 digits of account number	3971	\$1,837.00
	Attn: Bankruptcy P.O. Box 629025 El Dorado Hills, CA 95762	When was the debt incurred?	2017-2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	■ Other, Specify cell phone	bill	

Debte	or 1 Giuseppa Amato		Case number (if known)	
4.5 2	Target N.B.	Last 4 digits of account number	4605	\$0.00
	Nonpriority Creditor's Name P.O. Box 673	When was the debt incurred?	2009	
	Minneapolis, MN 55440 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	710 of the date you me, the claim	or check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify store chare	eg card believed paid	
1.5				
3	Time Warner Cable Nonpriority Creditor's Name	Last 4 digits of account number	4001	\$297.00
	Attn: Bankruptcy Dept. 7815 Crescent Executive Drive	When was the debt incurred?	2016	
	Charlotte, NC 28217	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	Student loans	d Glaini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	or plans, and other similar debts	
	□ Yes	Other. Specify cable tv bil		
1.5 1	U-Haul c/o Nonpriority Creditor's Name	Last 4 digits of account number	<u>0610</u>	\$236.77
	Vengroff Williams, INc. P.O. Box 4155	When was the debt incurred?	2016	
	Sarasota, FL 34230-4155 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	an anat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other. Specify truck renta	I	

Debt	or 1 Giuseppa Amato		Case number (if known)	
4.5 5	U.S. Food Service, Inc.	Last 4 digits of account number	?	\$2,468.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 9399 West Higgins Road, Suite 100	When was the debt incurred?	2013-2014	
	Des Plaines, IL 60018 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other Specify food service	ce supplies	
4.5	Wardana		CC20	\$0.450.00
6	Verizon Nonpriority Creditor's Name	Last 4 digits of account number		\$6,459.00
	Attn: Bankruptcy P.O. Box 650051	When was the debt incurred?	2012-2014	
	Dallas, TX 75265 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	d Claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify cell phone		
4.5			0.457	
7	Windstream Nonpriority Creditor's Name	Last 4 digits of account number	0157	\$1,083.00
	Attn: Bankruptcy 1720 Galleria Blvd	When was the debt incurred?	2017	
	Charlotte, NC 28270 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other Specify Utility bill		

Debto	r 1 Giuseppa Amato		Case number (if known)	
4.5	Workers' Compensation Board of NY	Last 4 digits of account numbe	r ?	Unknown
	Nonpriority Creditor's Name 328 State Street	When was the debt incurred?	?	
	Schenectady, NY 12305 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
		Type of NONPRIORITY unsecui	red claim:	
	At least one of the debtors and another	☐ Student loans	ou diami.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	paration agreement or divorce that you	did not
	No	<u></u>	ring plans, and other similar debts	
		·		
	Yes	Other. Specify possible	WC claim	
Part 3	List Others to Be Notified About a De	ebt That You Already Listed		
is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th led for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection	agency here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo		
	d Account Services Bedford Ave		Part 1: Creditors with Priority Unsect	
	nore, NY 11710-0730		Part 2: Creditors with Nonpriority Un	secured Claims
	,	Last 4 digits of account number	5222	
Amer P.O.	and Address ricollect, Inc. Box 1505		ou list the original creditor? Part 1: Creditors with Priority Unsect Part 2: Creditors with Nonpriority Un	
Mani	towoc, WI 54221-1505	Last 4 digits of account number		
Name :	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	icollect, Inc.	· · · · · · · · · · · · · · · · · ·	☐ Part 1: Creditors with Priority Unsecu	ured Claims
	Box 1566		■ Part 2: Creditors with Nonpriority Un	secured Claims
Mani	towoc, WI 54221-1566	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
Asso	ciated Credit Services		☐ Part 1: Creditors with Priority Unsecu	ured Claims
	landers Rd #140 Box 5171		Part 2: Creditors with Nonpriority Un	secured Claims
	borough, MA 01581-5171			
	3 ,	Last 4 digits of account number	0669	
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
•	al One	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecu	ured Claims
	Box 30285		Part 2: Creditors with Nonpriority Un	secured Claims
Sait L	_ake City, UT 84130	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	Group	Line 4.53 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsect	ured Claims
	Technology Pkwy		Part 2: Creditors with Nonpriority Un	secured Claims
Geua	r Falls, IA 50613	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	ergent Outsourcing	Line 4.56 of (Check one):	Part 1: Creditors with Priority Unsect	ured Claims
P.O. 1	W 39th St. Suite 100 Box 9004 on, WA 98057		Part 2: Creditors with Nonpriority Un	secured Claims

Last 4 digits of account number

Deptor 1 Giuseppa Amato	Case number (if known)
<u></u>	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Credit Acceptance	Line 4.17 of (<i>Check one</i>):
P.O. Box 513	
Southfield, MI 48037	Part 2: Creditors with Nonpriority Unsecured Claims
Southheld, Wil 40037	Last 4 digits of account number
N	O 111 1 1 D 14 D 10 E1 E1 E 0
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Credit Collection Services	Line 4.39 of (Check one):
725 Canton Road	■ Part 2: Creditors with Nonpriority Unsecured Claims
Norwood, MA 02062	Last 4 digits of account number
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Credit Management LP	Line 4.57 of (Check one):
6080 Tennyson Parkway, Suite 100	■ Part 2: Creditors with Nonpriority Unsecured Claims
Plano, TX 75024	·
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Diversified Consultants .	Line 4.17 of (Check one):
10550 Deerwood Park Blvd. #309	Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32256	
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Enhanced Recovery Company	Line 4.53 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
8014 Bayberry Rd.	
Jacksonville, FL 32256	■ Part 2: Creditors with Nonpriority Unsecured Claims
.,	Last 4 digits of account number 8864
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
EOS CCA	Line 4.51 of (Check one):
P.O. Box 981002	
	Part 2: Creditors with Nonpriority Unsecured Claims
Boston, MA 02298-1002	Last 4 digits of account number
	<u> </u>
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
EOS CCA	Line 4.51 of (Check one):
700 Longwater Drive #200	■ Part 2: Creditors with Nonpriority Unsecured Claims
Norwell, MA 02061-1624	
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
EOS CCA	Line 4.56 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 981002	■ Part 2: Creditors with Nonpriority Unsecured Claims
Boston, MA 02298-1002	— Tart 2. Ofeurtors with Northholity Onsecured Glaims
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
EOS CCA	Line 4.56 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims
700 Longwater Drive #200	■ Part 2: Creditors with Nonpriority Unsecured Claims
Norwell, MA 02061-1624	■ Part 2. Greditors with Nonphority Onsecured Claims
•	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
First Collection Services	Line 4.57 of (<i>Check one</i>):
10925 Otter Creek E Blvd	·
Mabelvale, AR 72103-1661	■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number 0960
Name and Address	On which entry in Port 1 or Port 2 did year list the existent avaditor?
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
First Data Global Leasing	Line 4.23 of (Check one):
P.O. Box 173845	Part 2: Creditors with Nonpriority Unsecured Claims
Denver, CO 80217	Last 4 digits of account number
	Last 7 aigus oi account numbei
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
I C Systems Inc	Line <u>4.53</u> of (<i>Check one</i>): □ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 64378	

Debtor 1 Giuseppa Amato		Case number (if known)	
Saint Paul, MN 55164	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 3129	
Name and Address ICSystems, Inc. 444 Highway 96 East P.O. Box 64378 Saint Paul, MN 55164-0378	On which entry in Part 1 or Part 2 di Line 4.47 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Jefferson Capital Systems 16 McLeland Rd. Saint Cloud, MN 56303-2198	On which entry in Part 1 or Part 2 di Line 4.56 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 9962	
	Last 1 digits of decount fidings.	3902	
Name and Address Mercantile Adjustment 165 Lawrence Bell Dr., Suite 100 Buffalo, NY 14221-7900	On which entry in Part 1 or Part 2 di Line 4.26 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Midland Credit Management 350 Camino De La Reina, Suite 100 San Diego, CA 92108	On which entry in Part 1 or Part 2 di Line 4.8 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Midland Funding, LLC 2365 Northside Drive, Ste. 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 di Line 4.8 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Monroe County Sheriff's Office Civil Bureau 130 South Plymouth Ave., PSB 5 Rochester, NY 14614	On which entry in Part 1 or Part 2 di Line 4.17 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Monroe County Sheriff's Office Civil Bureau 130 South Plymouth Ave., PSB 5	On which entry in Part 1 or Part 2 di Line 4.46 of (Check one):	id you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
Rochester, NY 14614	Last 4 digits of account number	2617	
Name and Address My Agency of CNY, Inc. 824 N. State St Syracuse, NY 13208	On which entry in Part 1 or Part 2 di Line 4.39 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Cyracuse, IVI 13200	Last 4 digits of account number		
Name and Address National Recovery Agency 2491 Paxton St Harrisburg, PA 17111	On which entry in Part 1 or Part 2 di Line 4.30 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0070	
Name and Address Newman & Lickstein 235 East Water St Syracuse, NY 13202	On which entry in Part 1 or Part 2 di Line 4.18 of (Check one): Last 4 digits of account number		
	Last 4 digits of account number		
Name and Address Oswegeo County Sheriff's Office Civil Division	On which entry in Part 1 or Part 2 di Line 4.24 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	

Debtor 1 Giuseppa Amato	Case number (if known)		
39 Churchhill Rd. Oswego, NY 13126-6613	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address RAC 2803 Brewerton Rd. Syracuse, NY 13211-1003	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.43 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address Relin Goldstein & Crane, LLP 28 East Main Street, Suite 1800 Rochester, NY 14614	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address SECNY FCU P.O. Box 15040 4727 W. Seneca Tnpk Syracuse, NY 13215-0040	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.46 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address SECNY Federal Credit Union 3819 Brewerton Road Syracuse, NY 13212	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.46 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address Simon's Agency, INc. 3713 Brewerton Rd. Suite 1 Syracuse, NY 13212-3867	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address Spectrum Charter 400 Atlantic Street, 10th FI. Stamford, CT 06901	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.53 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address St. Joseph's Medical Attn: Patient Billing 104 Union Ave., Ste. 905 Syracuse, NY 13203	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.48 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address Stephen Einstein & Associates 39 Broardway, Suite 1250 New York, NY 10006	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address T-Mobile Customer Relations P.O. Box 37380 Albuquerque, NM 87176-7380	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.51 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address T-Mobile. 12920 SE 38th St Bellevue, WA 98006	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.51 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number		
Name and Address Trans World Systems Inc. 500 Virginia Dr. #514 Fort Washington, PA 19034	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.30 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		

Debtor 1 Giuseppa Amato	Case number (if known)
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Verizon Wireless	Line 4.56 of (Check one):
1 Verizon Place Alpharetta, GA 30004	■ Part 2: Creditors with Nonpriority Unsecured Claims
Alpharetta, GA 30004	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Whitelaw & Fangio	Line 4.24 of (Check one):
247-259 W. Fayette St	■ Part 2: Creditors with Nonpriority Unsecured Claims
Syracuse, NY 13202	Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 4,374.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 4,374.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 177,128.03
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 177,128.03

Fill in this informa	ation to identify your	ase:			
Debtor 1	Giuseppa Amato				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK		
Case number					
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2	<u> </u>		- Cidio	2 0000	
2.2	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		case:			
Debtor 1	Giuseppa Amato				
Debtor 2	First Name	Middle Name	Last Name	_	
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Case number					
(if known)					☐ Check if this is an amended filing
					amended ming
Official Fo	orm 106H				
Schedule	H: Your Code	ebtors			12/15
□ No ■ Yes 2. Within th	ne last 8 years, have you	you are filing a joint case, of the state of	roperty state or territ	ory? (Community proper	rty states and territories include)
■ No. Go to		use, or legal equivalent live	e with you at the time?	,	
in line 2 ag	gain as a codebtor only it o), Schedule E/F (Official	f that person is a guaran	ntor or cosigner. Mak	e sure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt
	Number, Street, City, State and Zi				.00 tilat app.).
	Number, Street, Sity, State and Zi				ioo iiiat appiyi
3.1 Fran	k Amato			☐ Schedule D,	line
3.1 Fran 102 T	, ,			☐ Schedule D, ■ Schedule E/F □ Schedule G	line F, line 4.22

Fill	in this information to identify your c	ase:							
	btor 1 Giuseppa A								
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: WESTERN DISTRICT	OF NEW YORK		_				
	se number 					Check if this is: An amende A suppleme	J	g postpetition	chapter
\sim	fficial Form 1001					13 income a	as of the fo	llowing date:	
	fficial Form 106l					MM / DD/ Y	YYY		
	chedule I: Your Inc								12/15
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse i de infori	s living nation a	with you, inclubout your spo	ide informuse. If mo	nation about y ore space is n	your leeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ling spouse	
	If you have more than one job, attach a separate page with information about additional		■ Employed			☐ Employed			
		Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	pizza shop mana	ager			-		
	Include part-time, seasonal, or self-employed work.	Employer's name	Sicilian Delight	Greece	NY,				
	Occupation may include student or homemaker, if it applies.			ge Cent 4615	er Dr.				
		How long employed the	here? 2 years						
Pai	rt 2: Give Details About Mor	nthly Income							
spoi	imate monthly income as of the duse unless you are separated. but or your non-filing spouse have me	ore than one employer, co	, G				•	·	J
mor	e space, attach a separate sheet to	this form.							
					Fo	r Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$	2,610.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,610.00	\$	N/A	

Deb	tor 1	Giuseppa Amato	_		Cas	se number (if	knov	/n)				
						or Debtor				Debton	r 2 or spouse	
	Сор	y line 4 here	4.		\$_	2,6	10.0	10	. \$_		N//	4_
5.	List	all payroll deductions:										
٥.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	20	86.7	74	\$		N/A	٨
	5a. 5b.	Mandatory contributions for retirement plans	5b		\$	30	0.0		. \$_		N//	
	5c.	Voluntary contributions for retirement plans	5c		\$		0.0	_	·		N//	
	5d.	Required repayments of retirement fund loans	5d		\$		0.0	_	·		N/A	
	5e.	Insurance	5e		\$		0.0		\$		N//	
	5f.	Domestic support obligations	5f.		\$		0.0	_	\$		N/A	_
	5g.	Union dues	5g	J.	\$		0.0	0	\$		N/A	4
	5h.	Other deductions. Specify:	5h	า.+	\$		0.0	10	+ \$		N/A	4
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	38	86.7	<u>'1</u>	\$_		N/A	<u> </u>
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,2	23.2	29	\$_		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a	\$		0.0	10	\$		N//	۸
	8b.	Interest and dividends	8b		φ ₋		0.0		· \$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	11	0.0		·		N//	
	8d.	Unemployment compensation	8d		\$		0.0		\$		N/A	
	8e.	Social Security	8e		\$		0.0	_	·		N//	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$		0.0	00	\$		N//	 A
	8g.	Pension or retirement income	8g	j.	\$		0.0	0	\$		N/A	4
		rent paid by adult son that lives				_			_			_
	8h.	Other monthly income. Specify: with debtor	8h	1.+	\$_				+ \$		N/A	
		rent paid by cousin that lives with debtor	_		\$_	30	00.0	10	. \$_		N/A	<u>4</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	60	00.0	00	\$_		N.	/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$		2,823.29	+	\$		N/A	= \$	2,823.29
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe						•		le J. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines								12.	\$	2,823.29
												nly income

☐ Yes. Explain:

13. Do you expect an increase or decrease within the year after you file this form?

Fill	in this information to identify your case:				
Deb	otor 1 Giuseppa Amato		Check	if this is:	
Dob	tor 2		_	n amended filing	ing postpotition abouter
	buse, if filing)				ring postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: WESTERN DISTRICT OF NEW Y	ORK	N	IM / DD / YYYY	
Cas	e number				
(If k	nown)				
\bigcap	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question.	e filing together, bo form. On the top of	oth are equal any addition	ly responsible fo al pages, write y	r supplying correct
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Debto	r 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		12	Yes
		Doughton		4.4	□ No ■
		Daughter		14	■ Yes □ No
					☐ Yes
		-			□ No
					□ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.	ou are using this fo lemental <i>Schedule</i>	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report the form and fill in the
	lude expenses paid for with non-cash government assistance if				
	value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)	our Income		Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		1,650.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		15.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00

ebtor 1	Giuseppa Amato	Case num	ber (if known)	
. Utili	ties:			
. 6a.	Electricity, heat, natural gas	6a.	\$	220.00
6b.	Water, sewer, garbage collection	6b.	\$	30.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	95.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	7.	\$	645.00
	dcare and children's education costs	8.	\$	
	hing, laundry, and dry cleaning	9.	\$	0.00
			\$	85.00
	sonal care products and services	10.	·	50.00
	ical and dental expenses	11.	\$	30.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	220.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	30.00
	ritable contributions and religious donations	14.	\$	0.00
	rance.	14.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	\$	0.00
	Vehicle insurance	15c.	\$	0.00
	Other insurance. Specify:	15d.	\$	
	· · ·	15u.	Φ	0.00
. raxe Spe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	·		Ψ	0.00
	allment or lease payments: Car payments for Vehicle 1	17a.	¢	0.00
		17a. 17b.	\$	
	Car payments for Vehicle 2		*	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report a ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sci		ur Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	·	20d.	·	
	Maintenance, repair, and upkeep expenses		·	0.00
	Homeowner's association or condominium dues	20e.	•	0.00
. Oth	er: Specify:	21.	+\$	0.00
Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	3,070.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,070.00
			·	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,070.00
. Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,823.29
	Copy your monthly expenses from line 22c above.	23b.		3,070.00
_00.	indiana, expenses non mis EEG above.	200.	T	3,070.00
230	Subtract your monthly expenses from your monthly income.			
200.	The result is your monthly net income.	23c.	\$	-246.71
For e modi	you expect an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of a
■ N				
ΠY	es. Explain here:			

Fill in this info	ormation to identify your	case:			
Debtor 1	Giuseppa Amato				
	First Name	Middle Name	Last Name	-	
Debtor 2	- 				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK		
Case number					☐ Check if this is an
()					amended filing
Declara			Debtor's Scl		12/15
If two married	people are filing togethe	r, both are equally respo	onsible for supplying corre	ect information.	
obtaining mon years, or both.		n connection with a ban			nt, concealing property, or or imprisonment for up to 20
Did you p	pay or agree to pay some	eone who is NOT an attor	rney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes.	Name of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	nmary and schedules filed	with this declaration a	nd
X /s/ Gi	iuseppa Amato		X		
Gius	eppa Amato ture of Debtor 1		Signature of D	Debtor 2	
Date	March 5, 2020		Date		

	Giuseppa Amato				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF N	EW YORK		
Case number					
if known)				Check if this is an amended filing	
e as complete a	of Financial A	e. If two married people are tach a separate sheet to thi	als Filing for Bankruptcy filing together, both are equally responsi s form. On the top of any additional page		4/
What is your Married Not mar	petails About Your Mari current marital status	tal Status and Where You Li			
What is your Married Not mar During the la	etails About Your Mari current marital status ried ast 3 years, have you liv	?	ere you live now?		
Married Not mar During the la	etails About Your Mari current marital status ried ast 3 years, have you liv	? ved anywhere other than wh	ere you live now?	Dates Debtor 2	<u> </u>
Married Not mar During the la	petails About Your Marier current marital status ried ast 3 years, have you live t all of the places you live ior Address:	ed in the last 3 years. Do not i	ere you live now? nclude where you live now.		
Part 1: Give D What is your Married Not mar During the late of	ried ast 3 years, have you live t all of the places you live ior Address: cond Street 7 13069	yed anywhere other than wheed in the last 3 years. Do not in the last 3 years.	ere you live now? nclude where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Deb	tor 1

Part 2	Explain the Sources o	f Your Income			
4. D i Fi	id you have any income fro	om employment or from operating the you received from all jobs and a dyou have income that you received.	all businesses, including part-	-time activities.	ndar years?
	l No				
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calendar year: ary 1 to December 31, 2019	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	e calendar year before tha ary 1 to December 31, 2018		\$49,028.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	e calendar year: ary 1 to December 31, 2017	Wages, commissions, bonuses, tips	\$12,854.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
In ar wi	clude income regardless of value of the public benefit payments. If you are filing a join	come during this year or the two whether that income is taxable. Exa ents; pensions; rental income; inter nt case and you have income that y s income from each source separar	amples of other income are a rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; an only once under Debtor 1. hat you listed in line 4.	
		Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
		Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
Part 3	List Certain Payments	You Made Before You Filed for	Bankruptcy		
6. Ar	No. Neither Debtor 1 individual primarily During the 90 days No. Go to Yes List be paid the not income.	elow each creditor to whom you pai nat creditor. Do not include paymer clude payments to an attorney for the	umer debts. Consumer debts Id purpose." d you pay any creditor a tota d a total of \$6,825* or more into the for domestic support oblighis bankruptcy case.	l of \$6,825* or more? n one or more payments and tales and tales.	he total amount you and alimony. Also, do
	^ Subject to adjus	tment on 4/01/22 and every 3 years	s aπer that for cases filed on	or after the date of adjustment	

Case number (if known)

Debtor 1 Giuseppa Amato

	☐ Yes. Debtor 1 or Debtor 2 or both hav During the 90 days before you filed			ıl of \$600 or more?	,
		domestic support obligation			you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this payment for
			paid	still owe	
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner r more of their voting	rships of which yo g securities; and ar	u are a general partner; corporation ny managing agent, including one fo
	☐ Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	SECNY Federal Credit Union vs. Giuseppa Amato 2016EF1061	debt collection	Supreme Court County	t, Onondaga	☐ Pending ☐ On appeal ☐ Concluded
	Credit Acceptance Corp. vs. Giuseppe Amato E2019004910	debt collection	Supreme Court County Hall of Justice Rochester, NY		■ Pending □ On appeal □ Concluded
	Palmer Fish, Co., Inc., DBA Palmer Food Services vs. Giuseppa Amato 8695/17	debt collection	Supreme Court County Hall of Justice Rochester, NY		☐ Pending ☐ On appeal ☐ Concluded
	Gerharz Equipment INc. vs. Frank Amato, dba GJP Eatery, GJP Pizza Express, INc and GJP Italian Eatery, INc. 2014- EF3333	debt collection	Supreme Court County NY	t, Onondaga	☐ Pending ☐ On appeal ■ Concluded

Case number (if known)

Debtor 1 Giuseppa Amato

tor 1 Giuseppa Amato		Case num	ber (if known)	
Case title	Nature of the case	Court or agency	Status	of the case
Case number	Nature of the case	Court of agency	Otatus	of the case
			☐ Pei	nding
				appeal
			☐ Co	ncluded
Within 1 year before you filed for ba Check all that apply and fill in the detail		erty repossessed, foreclo	sed, garnished, atta	ached, seized, or levied?
☐ No. Go to line 11.				
Yes. Fill in the information below.				
			Data	Value of the
Creditor Name and Address	Describe the Property		Date	property
	Explain what happene	d		
SECNY FCU	income garnishmen	t	5/16/19	Unknown
3819 Brewerton Rd.	Dranarty was reness	d		
Syracuse, NY 13212	☐ Property was reposs ☐ Property was foreclose			
	■ Property was garnish			
	, , ,			
	☐ Property was attache	ed, seized or levied.		
Santander Consumer USA Attn: Bankruptcy	Mitsubishi G4		12/19	Unknown
P.O. Box 560284	Property was repossed			
Dallas, TX 75356-0284	Property was foreclos			
	☐ Property was garnish	ned.		
	☐ Property was attache	ed, seized or levied.		
Credit Acceptance, Corp. 25505 West Twelve Mile Rd.	2016 Chevy Malibu		10/2017	Unknowr
Southfield, MI 48034-8339	■ Property was reposse	essed.		
	☐ Property was foreclo			
	☐ Property was garnish	ned.		
	☐ Property was attached	ed, seized or levied.		
	Single Famil Home 9617 White Tail Path	n, Brewerton, NY 13209	2018	Unknowr
	☐ Property was reposs	essed.		
	■ Property was foreclos			
	☐ Property was garnish			
	☐ Property was attached	ed, seized or levied.		
,	commercial pizza sł 371 S. Second St	nop building	2015	Unknown
	Fulerton, NY			
	☐ Property was repossed	essed.		
	Property was foreclos			
	☐ Property was garnish	ned.		

☐ Property was attached, seized or levied.

11.	. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No							
	☐ Yes. Fill in the details. Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount			
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 							
Pai	t 5: List Certain Gifts and Contributio	ns						
13.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person		did you give any gifts with a total value of more t Describe the gifts	han \$600 per person Dates you gave the gifts	? Value			
	Person to Whom You Gave the Gift and Address:	d						
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.		Describe what you contributed	Dates you contributed	Value			
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	uptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	Describe the property you lost and how the loss occurred	Includ	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pai	t 7: List Certain Payments or Transfe	rs						
16.	consulted about seeking bankruptcy or	prepari	iid you or anyone else acting on your behalf pay oing a bankruptcy petition? rs, or credit counseling agencies for services require		erty to anyone you			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Case number (if known)

Debtor 1 Giuseppa Amato

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No								
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I	iness or financial affair e as security (such as the	rs?						
	_ 110								
						_			
	Person Who Received Transfer Address	Description and va property transferre			any property or received or debts change	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No Yes. Fill in the details.		property to a se	elf-settled tru	ıst or similar device c	of which you are a			
	Name of trust	Description and va	lue of the proper	rty transform	ad	Date Transfer was			
	Name of trust Description and value of the property transferred								
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, association No Yes. Fill in the details.	were any financial account	ounts or instrum	nents held in					
		•	Type of account instrument	clo	te account was sed, sold, oved, or nsferred	Last balance before closing or transfer			
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other decash, or other valuables? No Yes. Fill in the details.					t box or other deposit	cory for securities,			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Stre State and ZIP Code)		escribe the o	contents	Do you still have it?			
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than your h	nome within 1 ye	ear before yo	ou filed for bankruptc	y?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Strate and ZIP Code)		escribe the (contents	Do you still have it?			

Debtor 1 Giuseppa Amato Case number (if known)

Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	or, or hold in trust				
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under or in violation of an environm	nental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini	strative proceeding under any env	rironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?				
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Debtor 1 Giuseppa Amato	Cas	se number (if known)
■ No. None of the above applies. Go to	Part 12.	
Yes. Check all that apply above and fil	I in the details below for each business.	
Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
Josie's Italian Eatery, LLC 9519 Brewerton Road	pizza shop. closed in 2017.	EIN: 82-0948930
Cicero, NY 13039		From-To 2017-2017
GJP Pizza Express, Inc. 140 State Route 104E	Pizza shop. Out of business.	EIN: unknown
NY 13106	none	From-To 2011 - 2012
Mannino's Food Service, Inc. 371 South 2nd Street	Pizza shop. Out of business.	EIN: unknown
Fulton, NY 13069	none	From-To 2011-2012
Roma's Pizza Box, Inc. 371 South Second St	Pizza shop. OUt of business.	EIN: unknown
Fulton, NY 13069		From-To 2015-2016
■ No □ Yes. Fill in the details below.		
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection rs, or both.
Giuseppa Amato Signature of Debtor 1	Signature of Debtor 2	
Date March 5, 2020	Date	
Did you attach additional pages to Your Statement No ☐ Yes	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankru	, ,,	

Fill in this inform	ation to identify your o	ase:			
Debtor 1	Giuseppa Amato				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	WESTERN DISTR	ICT OF NEW YORK		
0				_	
Case number (if known)					☐ Check if this is an amended filing
					amended ming
Official For	m 108				
		o for Indiv	iduale Filina l	Under Chapte	vr 7
Statemen	t of filterition	i ioi iliaiv	iduais Filling	Onder Chapte	12/15
If you are an indiv	ridual filing under chap	ter 7, you must fill	out this form if:		
creditors have	claims secured by you	ır property, or			
	ed personal property a				
You must file this whichev on the fo	er is earlier, unless the	thin 30 days after ye court extends the	ou file your bankruptcy of time for cause. You mus	petition or by the date se st also send copies to the	t for the meeting of creditors, creditors and lessors you list
If two married peo	ople are filing together	in a joint case, bot	h are equally responsible	e for supplying correct in	formation. Both debtors must
	d date the form.	a ,			
	nd accurate as possibl ur name and case num		needed, attach a separat	te sheet to this form. On t	he top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims			
1. For any credito information bel	-	rt 1 of Schedule D:	Creditors Who Have Cla	ims Secured by Property	(Official Form 106D), fill in the
Identify the cree	ditor and the property th	at is collateral	What do you intend to o secures a debt?	do with the property that	Did you claim the property as exempt on Schedule C?
	ogressive Leasing		☐ Surrender the propert		■ No
name:			Retain the property a		D V
Description of	couch lease		Retain the property ar Reaffirmation Agreer		☐ Yes
property			Retain the property ar	nd [explain]:	
securing debt:			continue to pay		_
Part 2: List Yo	ur Unexpired Personal	Property Leases			
For any unexpired in the information	d personal property lea below. Do not list rea	se that you listed i	expired leases are leases	Contracts and Unexpired that are still in effect; the me it. 11 U.S.C. § 365(p)(2	d Leases (Official Form 106G), fill e lease period has not yet ended. 2).
				- u x	
Describe your un	expired personal prop	erty leases			Will the lease be assumed?
Lessor's name:					□ No
Description of least Property:	sed				☐ Yes
					_
Lessor's name: Description of leas	sed				□ No
Property:					☐ Yes
Lessor's name:					□ No
		Otatawatf1	antian family distribution = ===	in a lla des Oberrer 7	
Official Form 108		Statement of Inf	ention for Individuals Fili	ing Under Chapter /	page 1

Debte	or 1 _	Giuseppa Amato	Case number (if known)	
_				
Desc Prope	•	of leased		☐ Yes
	or's na	ame: of leased		□ No
Prope	•	101104004		☐ Yes
	or's na	ame: of leased		□ No
Prope	•	i of feaseu		☐ Yes
	or's na	ame: of leased		□ No
Prope		i of leased		☐ Yes
	or's na	ame: of leased		□ No
Prope		i of leased		☐ Yes
Part 3	3: S	Sign Below		
Unde prope	r pena erty tha	alty of perjury, I declare that I have indicated my intention about ar at is subject to an unexpired lease.	y property of my estate that se	cures a debt and any personal
_		iuseppa Amato X		
		eppa Amato Sig ture of Debtor 1	gnature of Debtor 2	
	Date	March 5, 2020 Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Western District of New York

compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 650.00 Prior to the filing of this statement I have received \$ 650.00 Balance Due \$ 0.00 S 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None.	In re	Giuseppa Amato		Case No.		
Pursuant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$650.00 Balance Due \$650.00 Balance Due \$0.00 Sa35.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): Thave not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to nearle legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required: C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; (Other provisions as needed) None. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; CERTIFICATION Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 Date March 5, 2020 Date Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s)			Debtor(s)	Chapter	7	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtors(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept		DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
Prior to the filing of this statement I have received \$ 0.00 Balance Due \$ 0.00 S 0.00 S 0.00 S 0.00 S 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods or redemption motions under 11 USC 722. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 Date March 5, 2020 Representation of the debtor in any agreement or arrangement for payment to me for representation of the debtor(s) in Rochester, NY 14614-1601 388-222-22222 Fax: 588-262-2625 karl@W.Suza	C	compensation paid to me within one year before the filing of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	ı
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2. \$ 335.00 of the filing fee has been paid. 3. The source of the compensation paid to me was: Debtor Other (specify): 4. The source of compensation to be paid to me is: Debtor Other (specify): 5. In source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation of the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreed to share the above-disclosed fee persons who are not members or associates of my law firm. A copy of the agreement of illed the person or persons who are not members and associates of my law firm. A copy of the agreement associates of my law firm. A copy of the agreement associates of my law firm. A copy of the apresentation of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Characteristic and particular associates of my law firm. A copy of the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance		Prior to the filing of this statement I have received		\$	650.00	
The source of the compensation paid to me was: ■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None. 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods or redemption motions under 11 USC 722. CERTIFICATION 1 certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 Date Isl Karl W. Kunze Signature of Attorney at Law 16 West Main Street Suite 310 Rochester, NY 14614-1601 S68-222-2222 Fax: 588-262-2625 Karl@R22law.com		Balance Due			0.00	
■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None. 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods or redemption motions under 11 USC 722. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 March 5, 2020 March 6, 2020 March 8, 2020 March 8, 2020 March 9, 4torney at Law 16 West Main Street Suite 310 Rochester, NY 14814-1601 Solvester, Solves	2. \$	335.00 of the filing fee has been paid.				
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■ Debtor □ Other (specify): 1 I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. 1 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None. 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods or redemption motions under 11 USC 722. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 March 5, 2020 March 5, 2020 March 6, 2020 March 7, 14614-1601 September 9, 14		■ Debtor □ Other (specify):				
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a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] None. 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, reaffirmation agreements and applications as needed, motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods or redemption motions under 11 USC 722. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020 Date Isl Karl W. Kunze Karl W.						
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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. March 5, 2020	7. I	Representation of the debtors in any disch any other adversary proceeding, reaffirmat	nargeability actions, judi	cial lien avoidance olications as need	led, motions pursuant to 11	r
March 5, 2020 Date S Karl W. Kunze Karl W. Kunze			CERTIFICATION			
Karl W. Kunze Signature of Attorney Karl W. Kunze, Attorney at Law 16 West Main Street Suite 310 Rochester, NY 14614-1601 585-222-2222 Fax: 585-262-2625 karl@k22law.com			greement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
Karl W. Kunze Signature of Attorney Karl W. Kunze, Attorney at Law 16 West Main Street Suite 310 Rochester, NY 14614-1601 585-222-2222 Fax: 585-262-2625 karl@k22law.com	М	larch 5, 2020	/s/ Karl W. Kunze			
Karl W. Kunze, Attorney at Law 16 West Main Street Suite 310 Rochester, NY 14614-1601 585-222-2222 Fax: 585-262-2625 karl@k22law.com	D	ate				
16 West Main Street Suite 310 Rochester, NY 14614-1601 585-222-2222 Fax: 585-262-2625 karl@k22law.com						
Rochester, NY 14614-1601 585-222-2222 Fax: 585-262-2625 karl@k22law.com			16 West Main Str	•		
585-222-2222 Fax: 585-262-2625 karl@k22law.com				614 1601		
			•			
Name of law firm				1		
			Name of law firm			

United States Bankruptcy Court Western District of New York

In re	Giuseppa Amato		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifier	s that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	March 5, 2020	/s/ Giuseppa Amato		
		Giuseppa Amato		
		Signature of Debtor		

9519 Brewerton, LLC 9519 Brewerton Rd., Suite 118 Brewerton, NY 13029

Acima Credit 9815 S. Monroe St. Sandy, UT 84070

Allied Account Services 422 Bedford Ave Bellmore, NY 11710-0730

Americollect, Inc. P.O. Box 1505 Manitowoc, WI 54221-1505

Americollect, Inc. P.O. Box 1566 Manitowoc, WI 54221-1566

AmeriPride Uniform Services 3909 New Court Ave Syracuse, NY 13206-1669

Amica Mutual Insurance Co. Attn: Bankruptcy Dept. 100 Amica Way Lincoln, RI 02865-1167

Associated Credit Services 115 Flanders Rd #140 P.O. Box 5171 Westborough, MA 01581-5171

Atg Credit, LLC P.O. Box 14895 Chicago, IL 60614-0895

Atlas Music 1764 Empire Blvd Webster, NY 14580

Capaco, Inc. 4000 New Court Ave. Syracuse, NY 13206 Capital One P.O. Box 30285 Salt Lake City, UT 84130

Capital One Bank NA P.O. Box 98873 Las Vegas, NV 89193-8873

Casa Imports
Division of RLE Corp
P.O. Box 982008
Boston, MA 02298

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613

Chautauqua Patrons Insurance Co. 529 West 3rd Street Jamestown, NY 14701

Chex Systems Inc 7805 Hudson Road, Suite 100 Saint Paul, MN 55125

Chili Hut Realty 41 Notre Dame Lane Utica, NY 13502

City Chamberlain's Office 141 South First St. Fulton, NY 13069

City of Fulton Watewr & Sanitation 141 South First St Fulton, NY 13069

Coca Cola Refreshments USA, INc Attn: Bankruptcy P.O. Box 4108 Boston, MA 02211 Compassionate Family Medicine 6221 State Route 31, Suite 104 Cicero, NY 13039-8724

Convergent Outsourcing 800 SW 39th St. Suite 100 P.O. Box 9004 Renton, WA 98057

Cortrust Bank P.O. Box7030 Mitchell, SD 57301

Credit Acceptance P.O. Box 513 Southfield, MI 48037

Credit Acceptance, Corp. 25505 West Twelve Mile Rd. Southfield, MI 48034-8339

Credit Collection Services 725 Canton Road Norwood, MA 02062

Credit Management LP 6080 Tennyson Parkway, Suite 100 Plano, TX 75024

Diversified Consultants . 10550 Deerwood Park Blvd. #309 Jacksonville, FL 32256

East Area Vol. Emergency Services, Inc. P.O. Box 34
East Syracuse, NY 13057

Enhanced Recovery Company 8014 Bayberry Rd. Jacksonville, FL 32256

EOS CCA P.O. Box 981002 Boston, MA 02298-1002 EOS CCA
700 Longwater Drive #200
Norwell, MA 02061-1624

Erie Insurance c/o Brennan & Clark Ltd. 721 E. Madison, Ste. 200 Villa Park, IL 60181

Family Care Medical Group Attn: Patient Billing 1001 West Fayette St #400 Syracuse, NY 13204

Feher Rubbish Removal, INc. P.O. Box 11009 Syracuse, NY 13218

Ferraro Foods 287 S. Randolphville Road Piscataway, NJ 08854

First Collection Services 10925 Otter Creek E Blvd Mabelvale, AR 72103-1661

First Data Global Leasing P.O. Box 173845 Denver, CO 80217

First Data Global Leasing c/o Hunter Warfield 4620 Woodland Corporate Blvd. Tampa, FL 33614

Frank Amato 102 Tidd Circle Farmington, NY 14425

Gerharz Equipment, Inc. 220 Teall Ave Syracuse, NY 13210

I C Systems Inc P.O. Box 64378 Saint Paul, MN 55164

ICSystems, Inc. 444 Highway 96 East P.O. Box 64378 Saint Paul, MN 55164-0378

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Jefferson Capital Systems 16 McLeland Rd. Saint Cloud, MN 56303-2198

Key Bank Attn: Bankruptcy (OH-01-51-4002) 4910 Tiedeman Road Cleveland, OH 44144

Macys Bankruptcy Processing P.O. Box 8053 Mason, OH 45040

Mercantile Adjustment 165 Lawrence Bell Dr., Suite 100 Buffalo, NY 14221-7900

Merchant Cash Group c/o Global Solutions Biz, LLC 400 Galleria Parkway Suite 1500 Atlanta, GA 30339

Midland Credit Management 350 Camino De La Reina, Suite 100 San Diego, CA 92108

Midland Funding, LLC 2365 Northside Drive, Ste. 300 San Diego, CA 92108 Monroe County Sheriff's Office Civil Bureau 130 South Plymouth Ave., PSB 5 Rochester, NY 14614

MVP Healthcare C/O GB Collections, INc. 145 Bradford Dr West Berlin, NJ 08091-9269

My Agency of CNY, Inc. 824 N. State St Syracuse, NY 13208

National Grid / Niagara Mohawk Attn: Bankruptcy 300 Erie Blvd., West Syracuse, NY 13202

National Recovery Agency 2491 Paxton St Harrisburg, PA 17111

New York State Dept. of Taxation Bankruptcy Section P.O. Box 5300 Albany, NY 12205-0300

Newman & Lickstein 235 East Water St Syracuse, NY 13202

North Medical Attn: Patient Billing 5100 W. Taft Rd., Ste. 2L Liverpool, NY 13088

Oswegeo County Sheriff's Office Civil Division 39 Churchhill Rd. Oswego, NY 13126-6613

Oswego County DSS P.O. Box 1320 100 Spring Street Mexico, NY 13114 Oswego County DSS P.O. Box 1320 Mexico, NY 13114

Palmer Fish Co., Inc., DBA Palmer Food Services 900 Jefferson Road, Ste. 1000 Rochester, NY 14627

Paul F. Daniels Pauls Provisions, LLC 1150 McQuade Ave. Utica, NY 13501

Paychex 911 Panorama Trail South Rochester, NY 14625

Pediatric Service Group 725 Irving Ave., Suite 504 Syracuse, NY 13210

Permanent General Assurance Corp. P.O. Box 305054 Nashville, TN 37230-5054

Progressive Corp.
ATTN: Bankruptcy
6300 Wilson Mills Road
Cleveland, OH 44143

Progressive Leasing 256 Data Drive Draper, UT 84020

Progressive Leasing, LLC Attn: Bankruptcy Dept. 256 Data Drive Draper, UT 84020-2315

Prospect Hill Radiology Group PC Attn: Patient Billing 301 Prospect Ave Syracuse, NY 13203

RAC 2803 Brewerton Rd. Syracuse, NY 13211-1003

Raponi Plumbing & Heating 507 W. Broadway Fulton, NY 13069

Relin Goldstein & Crane, LLP 28 East Main Street, Suite 1800 Rochester, NY 14614

Rent A Center Attn: Bankruptcy Dept. 5501 Headquarters Drive Plano, TX 75024

Renzi Foodservice P.O. Box 23 Watertown, NY 13601-0023

RG&E Attn: Bankruptcy Dept. 89 East Avenue Rochester, NY 14649

Santander P.O. Box 961211 Fort Worth, TX 76161

Santander Consumer USA Attn: Bankruptcy P.O. Box 560284 Dallas, TX 75356-0284

SECNY FCU
P.O. Box 15040
4727 W. Seneca Tnpk
Syracuse, NY 13215-0040

SECNY Federal Credit Union c/o Riehlman, Shafer & Shaw 7693 State Route 281 P.O. Box 544 Tully, NY 13159 SECNY Federal Credit Union 3819 Brewerton Road Syracuse, NY 13212

Simon's Agency, INc. 3713 Brewerton Rd. Suite 1 Syracuse, NY 13212-3867

Spectrum Charter 400 Atlantic Street, 10th Fl. Stamford, CT 06901

Sprint 10002 Park Meadows Dr. Lone Tree, CO 80124

St. Joseph's Medical Attn: Patient Billing 104 Union Ave., Ste. 905 Syracuse, NY 13203

St. Joseph's Medical PC P.O. Box 844210 Boston, MA 02284-4210

State Farm Attn: Bankruptcy 100 State Farm Place Ballston Spa, NY 12020-8000

Stephen Einstein & Associates 39 Broardway, Suite 1250 New York, NY 10006

Synchrony Bank Attn: Bankruptcy P.O. Box 965061 Orlando, FL 32896-5061

T Mobile Attn: Bankruptcy P.O. Box 629025 El Dorado Hills, CA 95762 T-Mobile Customer Relations P.O. Box 37380 Albuquerque, NM 87176-7380

T-Mobile. 12920 SE 38th St Bellevue, WA 98006

Target N.B. P.O. Box 673 Minneapolis, MN 55440

Time Warner Cable
Attn: Bankruptcy Dept.
7815 Crescent Executive Drive
Charlotte, NC 28217

Trans World Systems Inc. 500 Virginia Dr. #514 Fort Washington, PA 19034

U-Haul c/o Vengroff Williams, INc. P.O. Box 4155 Sarasota, FL 34230-4155

U.S. Food Service, Inc. Attn: Bankruptcy Dept. 9399 West Higgins Road, Suite 100 Des Plaines, IL 60018

Verizon Attn: Bankruptcy P.O. Box 650051 Dallas, TX 75265

Verizon Wireless 1 Verizon Place Alpharetta, GA 30004

Whitelaw & Fangio 247-259 W. Fayette St Syracuse, NY 13202 Windstream Attn: Bankruptcy 1720 Galleria Blvd Charlotte, NC 28270

Workers' Compensation Board of NY 328 State Street Schenectady, NY 12305